॥ ज्ञानमयो भव ॥

Progressive Education Society's

MODERN COLLEGE OF PHARMACY

Borhadewadi, Dehu - Alandi Road, At post Moshi Pune 412105

APPLICATION FORM FOR ADMISSION TO **Form No. 116**

FIRST YEAR D. PHARM / SECOND YEAR D. PHARM. OF TWO YEAR DIPLOMA COURSE IN PHARMACY FOR THE ACADEMIC YEAR 20 - 20

Instructions : 1. Application forms is to be filled and signed by the candidate in his / her own handwriting
2. Application without required certificates shall be rejected.
3. Strike off whatever is not applicable.

1) NAME :(as it appears on the mark sheet of qualifying examination): (in Capital letters)

2) SEX : Male ☐ Female ☐

3) DATE OF BIRTH ☐☐☐☐☐☐☐☐

4) Blood Group:

5) Place of Birth : Town_____ Dist _____ State _____

6) Parent's / Guardin's Name:_____

Name Of Father:_____

Occupation Of Parent/Guardin:_____

Annual Family Income:_____

Affix Passport Size Photograph Here

7) ADDRESS FOR CORRESPONDENCE :_____

_____ Pin : ☐☐☐☐☐☐☐☐

Telephone No. (With STD Code) _____ Mobile No.:_____

E-Mail Address (If any) _____

8) Permanent Address :_____

_____ Pin : ☐☐☐☐☐☐☐☐

Telephone No. (With STD Code) _____ Mobile No.:_____

E-Mail Address (If any) _____

9) Category : Open ☐ Reserv ☐

10) Reserved Category States (Please Tick) : (Open/SC/ST/NT1/NT2/NT3/SBC/OBC)

11) H. S. C. or equivalent Examination

Name of Board:_____ Year of Passing:_____

Grand Total Mark		Grand Total Mark	
Mark Obtained	Maximum Marks	Mark Obtained	Maximum Marks

P.T.O

12) F. Y. D. Pharm

Name of Board:_____

Subject	PH I	PC I	PG I	BCP	HAP	HECP	Mark in %	Grand Total Mark
Mark Obtained								
Maximum Marks								

13) DECLARATION BY THE APPLICATION

I,_____ here by declare that,
(Name of the Applicant)

1) I have read all the rules of Admission as contained the prospects of the institute and admission brochure of Government of Maharashtra.

2) I undertaken and bind myself rules and on understanding these rules, I have filled this Application form for consideration for admission to the first year of Diploma courses in Pharmacy at the Institute.

3) I, understand and accept that my admission will be provisional and subject to the verification of of all document; mentioned in the prospectus and required by Director, Technical education, M.S. Mumbai, as also to the fulfillment of eligibility condition laid down by statutory Bodies.

The information given by me in my application is true to the best of my knowledge and belief.

Date : _____

Place : _____

Signature of the Candidate with Name

14) DECLARATION TO BE SIGNED BY THE CANDIDATE PARENT / GUARDIAN

I,_____ delairea that

1) The particulars furnished by my son/daughter/ward in this/ her application form are correct to the best of my knowledge belief.
2) I undertake and bind myself to pay on behalf of my son/daughter/ward tuition fees, other fees and fine (lived) etc. by the date which the institute may specify. In the event of failure on my part/or on the part of my son/daughter/ward to pay the fees or fine, the Principal of the institute may take such action against my son/ daughter/ward as he deems fit.
3) I substantiate and accept the aforesaid declaration made by my ward.

Date : _____

Place : _____

Signature of Parent / Guardian With Name

D. Pharm **For Bank details as below**

A/c. Name : Modern College of Pharmacy For Ladies P G A/C	
Bank Name : IDBI Bank , Nigdi br.	IFSC code : IBKL0000087
MICR. CODE : 411259004	A/c. No. : 0087104000573276

PRINCIPAL
Progressive Education Society's
Modern College of Pharmacy (For Ladies)
Borhadewadi, At/ Post-Moshi
Tal.Haveli,Dist.Pune - 411070